



,				
s a be	low named invento	r, I hereby declare	e that:	•
ly citiz	enship, residence a	and post office add	dress are as listed below no	ext to my name.
believ	e I am the original, a patent is sought o			et matter which is claimed and for um Channels and Related Probes.
ell I in	es and Methods			
ne spe	cification of which			
a) []	is attached hereto			and was amended
b) [x]	was filed on Febru	Jary 25, 1998		09/030,482 and was amended
-> f 1		d claimed in Interr	national Application No.	filed on and
c) []	amended on	·		•
		Acknowle	dgement of Duty of Discl	osure
includi	ing the ciaims, as a	erial to the patenta Code of Federal	bility of the subject matter Regulations § 1.56(a)	above identified specification, ve. I acknowledge the duty to disclose claimed in this application in
		Conti	nuation-In-Part Applicatio	ON .
prior § 112	below and, insolar	cation in the manner duty to disclose the courted between	ner provided by the first par	of any United States application(s) of this application is not disclosed in the ragraph of Title 35, United States Code ined in Title 37, Code of Federal orior application and the national or PC
				(Status)(patented,pending,abandone
(Applie	cation Serial No.)	(Filing Date)		
(- 4-1-				(Status)(patented,pending,abandone
(A 1)	cation Serial No.)	(Filing Date)		(Status)(paromos);
(Appii	Cation Senai No.)	, ,	Power of Attorney	
Stan	iley D. Ference III, I	F TO TIOG. TO SE	n. NO. 32,746, Marina T. L	arson, PTO Reg. No. 32,038 and AHL & LARSON, having office at 1992 osecute this application and to transact h.
SE	END CORRESPONDEN PPEDAHL & LARSON 192 COMMERCE STRE	CE TO:		HONE CALLS TO:

1992 COMMERCE STREET, SUITE 309 YORKTOWN HEIGHTS, NY 10598-4412

FILE NO	NMED.P-001-US
LIFE IAC	141410000000000000000000000000000000000

Claim for Priority

I hereby claim priority under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have identified any foreign applications for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

COUNTRY	APPLICATION(S), FILED WITH APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	PRIORITY CLAIMED
		,00,		YES[]NO[]
				YES[]NO[]
				YES[]NO[]
FOREIGN APPLICAT APPLICATION	ION(S), IF ANY, FILED MORE T		I.	PRIOR TO SAID
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

>			
NAME OF SOLE OR FIRST INVENTOR	LAST NAME SNUTCH	FIRST NAME TERRY	MIDDLE NAME P.
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE CANADA	COUNTRY OF CITIZENSHIP CANADA
POST OFFICE ADDRESS 3963 W. 24 TH Avenue		CITY VANCOUVER	STATE/COUNTRY ZIP CODE CANADA V6S 1M1
DATE MAY 27,1998		SIGNATURE	

[X] Signature for additional joint inventor attached.	Number of Pages _1_
[X] Signature for additional joint inventor additional	ntative for deceased or

[] Signature by Administrator(trix) or legal representative for deceased or incapacitated inventor. Number of Pages ___.

[] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR § 1.47. Number of Pages ___.

AME OF SECOND	LAST NAME	FIRST NAME DAVID	MIDDLE NAME L.
VENTOR ESIDENCE &	CITY OF RESIDENCE VANCOUVER	STATE OR COUNTRY OF RESIDENCE CANADA	COUNTRY OF CITIZENSHIP CANADA
CITIZENSHIP		CITY VANCOUVER	STATE/COUNTRY ZIP CODE CANADA V5K 3P7
DATE May 2	7/199	SIGNATURE Jana Z	T
NAME OF THIRD NVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS		CITY	STATE/COUNTRY ZIP CODE
DATE		SIGNATURE	
NAME OF FOURTH LAST NAME INVENTOR RESIDENCE & CITY OF RESIDENCE		FIRST NAME	MIDDLE NAME
		STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP
CITIZENSHIP POST OFFICE ADDRESS		CITY	STATE/COUNTRY ZIP CODE
DATE		SIGNATURE	
NAME OF FIFTH LAST NAME INVENTOR		FIRST NAME	MIDDLE NAME
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS		CITY	STATE/COUNTRY ZIP CODE
F031 011102 1			